

STATE OF NEW HAMPSHIRE
APPLICATION FOR CERTIFICATE OF AUTHORITY OF A
FOREIGN CONSUMER CO-OPERATIVE CORPORATION
NOTES FOR COMPLETING Form No. 40 CO-OP (RSA 293-A:15.03 & RSA 301-A:37)

Notes:

1. If the name of the corporation does not contain the word "Corporation", "Incorporated" or "Limited" or an abbreviation "Corp.", "Inc." or "Ltd.", insert the name of the corporation with the word or abbreviation which it elects to add thereto for use in New Hampshire.

OR

If a professional corporation, RSA 294-A:7 requires the name shall end in "Professional Corporation", "Professional Association", "Prof. Corp.", "Prof. Ass'n.", "P.C." or "P.A."

OR

If the corporate name is not available for use in New Hampshire, enter the name to be used in New Hampshire. In this case a trade name application must be filed with an additional \$50.00 fee and a copy of a board of directors' resolution to use the trade name in New Hampshire. The board of directors' resolution must be signed by the SECRETARY of the corporation. (A corporate designation cannot be used on the trade name.) If the corporate name is available, and a trade name in addition to the corporate name is to be used, do not enter the trade name in this space but file a trade name application with a \$50.00 fee.

2. The registered office must be the agent's business address. If a post office box is given, the physical location of the business office **must also** be given. The registered agent shall be the agent of the corporation upon whom any process, notice or demand required or permitted by law to be served upon the corporation may be served.

293-A:15.07 Registered Office and Registered Agent of Foreign Corporations.

Each foreign corporation authorized to transact business in this state shall continuously maintain **in this state**:

- (1) a registered office that may be the same as any of its places of business; and
- (2) a registered agent, who may be:
 - (i) an individual who resides in this state and whose business office is identical with the registered office;
 - (ii) a domestic corporation or not-for-profit domestic corporation whose business office is identical with the registered office; or
 - (iii) a foreign corporation or foreign not-for-profit corporation authorized to transact business in this state whose business office is identical with the registered office.
3. This statement is not required by statute but may be helpful in determining the availability of the corporation's name.
4. Exact corporate name of corporation making the application.
5. Signature and title of person signing for the corporation. Must be signed by chairman of the board of directors, president or another officer; or see RSA 293-A:1.20(f) for alternative signatures.
6. An **ORIGINAL** certificate of legal existence or good standing must accompany this application. (Photocopies or fax copies will not be accepted.) The certificate must be duly authenticated within 60 days of the filing of this application by the proper officer of the state or country under the laws of which the corporation is organized. (A certificate of good standing regarding taxes from a state department of revenue administration **is not** acceptable.)
7. This form **must be accompanied** by form SRA, certification pursuant to RSA 421-B:11, II, relative to offering securities for sale in New Hampshire. Please call the Corporation Division (603-271-3244) with any questions you may have with this requirement or regarding any other questions concerning this application.

Mail total fees, **DATED & SIGNED ORIGINAL & ONE EXACT OR CONFORMED COPY, ORIGINAL CERTIFICATE OF LEGAL EXISTENCE OR GOOD STANDING ISSUED BY THE STATE OR COUNTRY OF INCORPORATION & FORM SRA** (See Notes 6 & 7) to: Corporation Division, Department of State, 107 North Main Street, Concord, NH 03301-4989.

STATE OF NEW HAMPSHIRE

Filing fee: \$50.00
Use black print or type.
Leave 1" margins both sides.

Form No. 40 CO-OP
RSA 293-A:15.03
& RSA 301-A:37

APPLICATION FOR CERTIFICATE OF AUTHORITY OF A
FOREIGN CONSUMER CO-OPERATIVE CORPORATION

TO THE SECRETARY OF STATE OF THE STATE OF NEW HAMPSHIRE

PURSUANT TO THE PROVISIONS OF THE NEW HAMPSHIRE BUSINESS CORPORATION ACT,
THE UNDERSIGNED CORPORATION HEREBY APPLIES FOR A CERTIFICATE OF AUTHORITY
TO TRANSACT BUSINESS IN NEW HAMPSHIRE AND FOR THAT PURPOSE SUBMITS THE
FOLLOWING STATEMENT:

FIRST: The name of the corporation is _____
_____.

SECOND: The name which it elects to use in New Hampshire is _____
_____. (Note 1)

THIRD: It is incorporated under the laws of _____.

FOURTH: The date of its incorporation is _____ and
the period of its duration is _____.

FIFTH: (Complete this statement only if a Professional Association.) All the shareholders and those of its
directors and officers as are required by the laws of (enter the State of Incorporation) _____
_____ and by RSA 294-A:20 are licensed in one or more states, territories of
the United States or the District of Columbia to render a professional service described in the statement of
purpose of the corporation.

SIXTH: The complete address (including zip code and post office box, if any) of its principal office is ____
_____.

SEVENTH: The name of its registered agent **IN NEW HAMPSHIRE** is _____
_____ and the complete address (including zip code
and post office box, if any) of its registered office **IN NEW HAMPSHIRE** is (agent's business address)

_____. (Note 2)

EIGHTH: The principal purpose or purposes which it proposes to pursue in the transaction of business in New Hampshire are _____

_____. (Note 3)

NINTH: The names and usual business addresses of its current officers and directors are: (If there are additional officers or directors, attach additional sheet OR if the laws of the state of incorporation do not require directors, indicate below.)

Name

Title

Address

OFFICERS

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

DIRECTORS

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Dated _____, _____

_____. (Note 4)

By _____ (Note 5)

Signature of its _____

Print or type name

Mail total fees, **DATED & SIGNED** ORIGINAL & ONE EXACT OR CONFORMED COPY, **ORIGINAL** CERTIFICATE OF LEGAL EXISTENCE OR GOOD STANDING ISSUED BY THE STATE OR COUNTRY OF INCORPORATION & FORM SRA (See Notes 6 & 7) to: Corporation Division, Department of State, 107 North Main Street, Concord, NH 03301-4989